



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
United States Patent and Trademark Office  
Address: COMMISSIONER FOR PATENTS  
P.O. Box 1450  
Alexandria, Virginia 22313-1450  
[www.uspto.gov](http://www.uspto.gov)

## \*BIBDATASHEET\*

Bib Data Sheet

CONFIRMATION NO. 4851

SERIAL NUMBER 10/772,099	FILING OR 371(c) DATE 02/04/2004 RULE	CLASS 424	GROUP ART UNIT 1655	ATTORNEY DOCKET NO. 795-10-3
<b>APPLICANTS</b> Jeffrey T. Haley, Mercer Island, WA;  <i>(ewm 2/26/04)</i>				
<b>** CONTINUING DATA *****</b> This application is a CIP of PCT/US02/35399 11/05/2002 which claims benefit of 60/332,916 11/05/2001 and claims benefit of 60/344,577 12/28/2001				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> ** 05/05/2004				
Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY WA	SHEETS DRAWING 1	TOTAL CLAIMS 49
Verified and Acknowledged 996	Examiner's Signature _____ Initials _____	INDEPENDENT CLAIMS 5		
<b>ADDRESS</b> 996				
<b>TITLE</b> LICORICE ROOT EXTRACT ORAL PATCH FOR TREATING CANKER SORES				
FILING FEE RECEIVED 1032	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		